

## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application No.	09/680,389
		Filing Date	October 4, 2000
		First Named Inventor	Glenn Reid
		Art Unit	2179
		Examiner Name	Chuong, Truc T.
Total Number of Pages in This Submission	5	Attorney Docket Number	4860P2474

### ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to Group		
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences		
<input type="checkbox"/> Amendment / Response	<input type="checkbox"/> Petition	<input checked="" type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)		
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert a Provisional Application	<input type="checkbox"/> Proprietary Information		
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter		
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):		
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	Return postcard.		
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s)			
<input type="checkbox"/> PTO/SB/08				
<input type="checkbox"/> Certified Copy of Priority Document(s)				
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application				
<input type="checkbox"/> Basic Filing Fee				
<input type="checkbox"/> Declaration/POA				
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53				
<table border="1"> <tr> <td>Remarks</td> </tr> </table>				Remarks
Remarks				

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Jeffery Scott Heileson, Reg. No. 46,765 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	12/1/04

### CERTIFICATE OF MAILING/TRANSMISSION

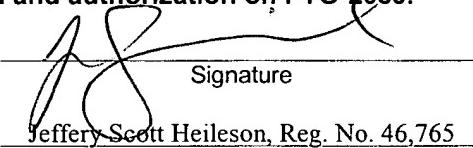
I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop Appeal Brief-Patents, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Typed or printed name	Cathy Bachmann		
Signature		Date	12/2/04

Based on PTO/SB/21 (04-04) as modified by Blakely, Sokoloff, Taylor & Zafman (wlr) 06/04/2004.  
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450



AFSP  
2-179

<b>NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES</b>		Docket Number (Optional)  4860P2474						
<p>I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop Appeal Brief-Patents, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.</p> <p>Signature <u>Cathy Bachmann</u> <i>12/12/04</i></p> <p>Typed or printed name <u>Cathy Bachmann</u></p>		<p>In re Application of <b>Glenn Reid</b></p> <table border="1"> <tr> <td>Application Number 09/680,389</td> <td>Filed 10/04/2000</td> </tr> <tr> <td colspan="2">For Integrated Time Line for Editing</td> </tr> <tr> <td>Art Unit 2179</td> <td>Examiner Chuong, Truc T.</td> </tr> </table>	Application Number 09/680,389	Filed 10/04/2000	For Integrated Time Line for Editing		Art Unit 2179	Examiner Chuong, Truc T.
Application Number 09/680,389	Filed 10/04/2000							
For Integrated Time Line for Editing								
Art Unit 2179	Examiner Chuong, Truc T.							
<p>Applicant hereby <b>appeals</b> to the Board of Patent Appeals and Interferences from the last decision of the examiner.</p> <p>The fee for this Notice of Appeal is (37 CFR 1.17(b)) <u>\$340.00</u></p> <p><input type="checkbox"/> Applicant claims small entity status under 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: _____</p> <p><input checked="" type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of the fee transmittal.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. <u>02-2666</u>. I have enclosed a duplicate copy of the fee transmittal.</p> <p><input type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.</p>								
<p><b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2039.</b></p> <p>I am the</p> <p><input type="checkbox"/> applicant/inventor.</p> <p><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)</p> <p><input checked="" type="checkbox"/> attorney or agent of record.</p> <p><input type="checkbox"/> attorney or agent acting under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) _____.</p> <p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.</p> <p><input type="checkbox"/> *Total of _____ forms are submitted.</p>								
<p> Signature</p> <p><u>Jeffery Scott Heileson, Reg. No. 46,765</u> Typed or printed name</p> <p><i>12/12/04</i> Date</p>								

Based on PTO/SB/31 (08-03) as modified by Blakely, Solokoff, Taylor & Zafman (wir) 09/11/2003.  
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DEC 06 2004

# FEE TRANSMITTAL FORTY 2004

Effective 10/01/2004. Patent fees are subject to annual revision.

**Complete if Known**

Application Number	09/680,389
Filing Date	October 4, 2000
First Named Inventor	Glenn Reid
Examiner Name	Chuong, Truc T.
Art Unit	2179
Attorney Docket No.	4860P2474

 Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$)

340.00

**METHOD OF PAYMENT** (check all that apply)

Check     Credit card     Money Order     Other     None

Deposit Account

Deposit Account Number 02-2666

Deposit Account Name Blakely, Sokoloff, Taylor & Zafman LLP

The Commissioner is authorized to: (check all that apply)

- Charge fee(s) indicated below     Credit any overpayments
- Charge any additional fee(s) or underpayment of fees as required under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.
- Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account

**FEE CALCULATION****1. BASIC FILING FEE**

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1001	790	2001	395	Utility filing fee	
1002	350	2002	175	Design filing fee	
1003	550	2003	275	Plant filing fee	
1004	790	2004	395	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	
SUBTOTAL (1)		(\$)			

**2. EXTRA CLAIM FEES**

Total Claims	45	Extra Claims	Fee from below	Fee Paid
Independent Claims	7	45* = 0	x 18.00 = \$0.00	
Multiple Dependent		7* = 0	x 88.00 = \$0.00	

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1202	18	2202	9	Claims in excess of 20	
1201	88	2201	44	Independent claims in excess of 3	
1203	300	2203	150	Multiple Dependent claim, if not paid	
1204	88	2204	44	**Reissue independent claims over original patent	
1205	18	2205	9	**Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2)		(\$)			0.00

\*or number previously paid, if greater. For Reissues, see below

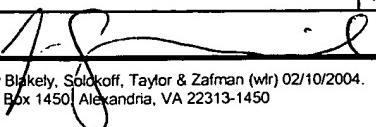
\* Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

(\$)

340.00

**Complete (if applicable)**

Name (Print/Type)	Jeffery Scott Heileson	Registration No. (Attorney/Agent)	46,765	Telephone	(408) 720-8300
Signature				Date	12/1/04

Based on PTO/SB/17 (10-03) as modified by Blakely, Sokoloff, Taylor & Zafman (wlr) 02/10/2004.  
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